

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 220

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Evan Bayh Committee

A. Full Name (Last, First, Middle Initial) Doyle Stephens Mailing Address 2101 N Benton Rd City Muncie State IN Zip Code 47304-9548 FEC ID number of contributing federal political committee. C Name of Employer Medical Consultants PC Occupation Physician Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 11 / 08 / 2006 Transaction ID: C540427 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Jason Stephens Mailing Address 400 E Randolph St Apt 40A City Chicago State IL Zip Code 60601-7438 FEC ID number of contributing federal political committee. C Name of Employer Columbia University Occupation Professor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt MM / DD / YYYY 11 / 08 / 2006 Transaction ID: C540431 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Robert Clay Stephens Mailing Address 1715 N Larrabee St # 5 City Chicago State IL Zip Code 60614-5621 FEC ID number of contributing federal political committee. C Name of Employer Deloitte Consulting Occupation Consultant Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 11 / 08 / 2006 Transaction ID: C540424 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2650.00
TOTAL This Period (last page this line number only)		